**All Saints National Academy**

**Reference Form**

Surname of Child: ……………………………………………………………………………… Date of Birth: …………………………..

Forename(s) of Child: …………………………………………………………………………………

Name of Parent/Guardian: ………………………………………………………………………………………………………………………

Address:………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….. Postcode: ……………………………………………………..

Home Telephone: ……………………………………………………………. Mobile: ………………………………………………………….

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..

This section must be completed by Vicar/Priest/Minister/Faith Leader or other (please specify):

Please confirm the information on the reverse of this form and indicate the regularity of worship:

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Signed: …………………………………………………………………………………………….. Position Held: ………………………………………………

Worship Attendance:

How frequently do you attend worship?

Weekly? ………. 3 times/month ………… Fortnightly ……………… Monthly …………….. Other ………………

(please tick)

Place(s) of worship should be obtained from more than one place of worship (if appropriate):

Name and Address of Place of Worship: ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Name of Vicar/Priest/Minister/Faith Leader or other (please specify): ………………………………………………………………………………………………………………………………………………………………..………

Telephone contact number: ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….. Postcode: ……………………………………………………..

Home Telephone: ……………………………………………………………. Mobile: ………………………………………………………….